PART B - FEE(S) TRANSMITTAL

| (SEP: 01 2009 | this form, together w | | or | <u>Fax</u> | P.O. Box 1450 Alexandria, Virgi (571)-273-2885 | inia 22313-1450 | should be completed where |
|---|---|---|--|---|---|--|---|
| INSTRUCTIONS: This for appropriate All further cor indicated unit person maintenance fee notification | condence including the lelow or directed otherwise is. | Patent, advance ordin Block I, by (a) | ders and notif) specifying a | fication new co | of maintenance fees worrespondence address; | vill be mailed to the current and/or (b) indicating a sep | arate "FEE ADDRESS" for |
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) | | | | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | |
| STEPHEN D. SCANLON JONES DAY 901 LAKESIDE AVENUE | | | | | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | |
| CLEVELAND, OH 44114 | | | | | Kathie J. | Kopczyk | (Depositor's name) |
| 9/05/2006 EAYALEW2 00000066 501432 10724986 | | | | 40thus | * ADDCOUNT | (Signature) | |
| | 00 DA 00 DA | | | | August 29 | 2006 | (Date) |
| APPLICATION NO. | TIPOT MANAGED D | | INVEN | TOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
| 10/724,986 TITLE OF INVENTION: A | 11/30/2003 PPARATUS TO IMPROVE | STABILITY OF A | Wayne AN MRAM O | | ROCESS AND OPERA | | 1884 |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | | PU | IBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | YES | \$700 | | | \$300 | \$1000 | 09/07/2006 |
| EXAMINER | | ART UNIT | | CI | ASS-SUBCLASS | | |
| LE, THONG QUOC | | 2827 | | _ | 365-158000 | | |
| CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (1) the names of or agents OR, all (2) the name of registered attorning to the control of the name | | | | nes of to DR, alterness attorness d patent | a single firm (having as a member a ey or agent) and the names of up to the attorneys or agents. If no name is | | |
| PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN | D RESIDENCE DATA TO Be an assignee is identified be 137 CFR 3.11. Completion EE | elow, no assignee of this form is NO | data will appe T a substitute i (B) RESIDE | ear on to for filin NCE: (0 | he patent. If an assign g an assignment. CITY and STATE OR (| | |
| Please check the appropriate | e assignee category or catego | ries (will not be pr | inted on the pa | atent): | ☐ Individual 图 Co | orporation or other private gr | oup entity Government |
| | enclosed: small entity discount permitte f Copies | ed) | Payment | in the ar | nount of the fee(s) is en it card. Form PTO-2038 ereby authorized by cha Number <u>50143</u> | | edit any overpayment, to ra copy of this form). |
| a Applicant claims S | (from status indicated above | 37 CFR 1.27. | b. Application For (if an | ant is no | o longer claiming SMA | LL ENTITY status. See 37 (| CFR 1.27(g)(2). |
| NOTE: The Issue Fee and P interest as shown by the rec | is requested to apply the lss publication Fee (if required) ords of the United States Pat | will not be accepted ent and Trademark | d from anyone Office. | other t | han the applicant; a reg | istered attorney or agent; or | ation identified above. the assignee or other party in |
| Authorized Signature | David I | 3. Coema | u | | Date Aug | gust 29, 2006 | |
| Toward on uninted manua | David B. Coc | hran | | | Registration N | $_{\text{No.}}$ 39,142 | |

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